CC
Ln
C)
(\J
¢¢
O
إيسا
M
C
M

## SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

17b 17c 17d 18
19a 19b 20a 20b 20c 21

**ITEMIZED RECEIPTS** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee, NAME OF COMMITTEE (In Full) President A. Full Name (Last, First, Middle Initial) Maria Date of Receipt Mailing Address Zip Code FEC ID number of contributing federal political committee. Amount of Each Receipt this Period Name of Employer Occupation 500.00 tomemat Receipt For: Election Cycle-to-Date ▼ **Primary** General Other (specify) ▼ B. Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address M M / / D G / Y Y City Zip Code State FEC ID number of contributing federal political committee. Amount of Each Receipt this Period Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General الواحدي الرجيج Other (specify) C. Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City Zip Code State FEC ID number of contributing federal political committee. Amount of Each Receipt this Period Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Committee of Section 899 Section 2018 Other (specify) Subtotal Of Receipts This Page (optional)..... Total This Period (last page this line number only) ......